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EPA

ENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION: VI

SITE NUMBER (to be assigned by Hq): NMD 000724053

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (*Preliminary Assessment*). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (*EN-335*); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: Transwestern - Mountainair Compressor Station

B. STREET (or other identifier): 10.2 miles south and west from NM14 on Pumping Station Road.

C. CITY: Mountainair

D. STATE: NM

E. ZIP CODE: 87036

F. COUNTY NAME: Torrance 057

G. OWNER/OPERATOR (if known)

1. NAME: Transwestern Pipeline Company

2. TELEPHONE NUMBER: (505) 864-7461

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE ☐ 6. UNKNOWN

I. SITE DESCRIPTION: The site is a compressor station serving a 30-inch diameter natural gas pipelin Natural gas condensates and cleaning solvents contaminated with PCB's were removed from the pipeline and handled on site.

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.): U.S.EPA Region VI

K. DATE IDENTIFIED (mo., day, & yr.): 4/8/87

L. PRINCIPAL STATE CONTACT

1. NAME: Steven J. Cary NMEID

2. TELEPHONE NUMBER: (505) 827-2898

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☒ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED (*no hazard*)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☐ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☒ 4. SITE INSPECTION NEEDED (*low priority*)

C. PREPARER INFORMATION

1. NAME: Paul A.Karas NMEID

2. TELEPHONE NUMBER: (505) 827-0596

3. DATE (mo., day, & yr.): May 11, 1987

III. SITE INFORMATION

A. SITE STATUS

☒ 1. ACTIVE (*Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if intro-quently.*)

☐ 2. INACTIVE (*Those sites which no longer receive wastes.*)

☐ (Th no

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midnight dumping" where s disposal has occurred.)

Reviewed by 6H-ES Date 6/22/87

B. IS GENERATOR ON SITE?

☐ 1. NO ☒ 2. YES (*specify generator's four-digit SIC Code*): 4923

SUPERFUND FILE

C. AREA OF SITE (*in acres*): 62.6

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg.-min.-sec.): 34 - 20 - 30 N

2. LONGITUDE (deg.-min.-sec.): 106 - 17 - 52 W

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E. ARE THERE BUILDINGS ON THE SITE? Compressor bldg, offices, radio communications bldg, maintenance

☐ 1. NO ☒ 2. YES (*specify*): bldg, and six residences.

REORGANIZED

Continued From Front

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking an X in the appropriate boxes.

A. TRANSPORTER	B. STORER	C. TREATER	D. DISPOSER
[ ] 1. RAIL	[ ] 1. PILE	[ ] 1. FILTRATION	[ ] 1. LANDFILL
[ ] 2. SHIP	[ ] 2. SURFACE IMPOUNDMENT	[ ] 2. INCINERATION	[ ] 2. LANDFARM
[ ] 3. BARGE	[ ] 3. DRUMS	[ ] 3. VOLUME REDUCTION	[ ] 3. OPEN DUMP
[ ] 4. TRUCK	[ ] 4. TANK, ABOVE GROUND	[ ] 4. RECYCLING/RECOVERY	[X] 4. SURFACE IMPOUNDMENT
[X] 5. PIPELINE	[ ] 5. TANK, BELOW GROUND	[ ] 5. CHEM./PHYS. TREATMENT	[ ] 5. MIDNIGHT DUMPING
[ ] 6. OTHER (specify):	[ ] 6. OTHER (specify):	[ ] 6. BIOLOGICAL TREATMENT	[ ] 6. INCINERATION
		[ ] 7. WASTE OIL REPROCESSING	[ ] 7. UNDERGROUND INJECTION
		[ ] 8. SOLVENT RECOVERY	[ ] 8. OTHER (specify):
		[ ] 9. OTHER (specify):	

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED Pipeline fluids contaminated by PCB's were placed in two unlinedimpoundments for an unkown period of time. One impoundment was later concrete lined and the other was closed.

V. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1 UNKNOWN [X] 2. LIQUID [ ] 3. SOLID [X] 4. SLUDGE [ ] 5. GAS

B. WASTE CHARACTERISTICS

[ ] 1. UNKNOWN [ ] 2. CORROSIVE [ ] 3. IGNITABLE [ ] 4. RADIOACTIVE [ ] 5 HIGHLY VOLATILE
[X] 6. TOXIC [ ] 7 REACTIVE [ ] 8. INERT [ ] 9 FLAMMABLE

[ ] 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below. Inventories and shipping manifests for PCB contaminated wastes have been kept since Oct, 1984. Some earlier records are available.

2. Estimate the amount(specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT: Unkown	AMOUNT: Unkown	AMOUNT: -----	AMOUNT: Unkown	AMOUNT: -----	AMOUNT: -----
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
[ ] (1) PAINT, PIGMENTS	[X] (1) OILY WASTES	[ ] (1) HALOGENATED SOLVENTS	[ ] (1) ACIDS	[ ] (1) FLYASH	[ ] (1) LABORATORY PHARMACEUT.
[ ] (2) METALS SLUDGES	[ ] (2) OTHER (specify):	[ ] (2) NON-HALOGNTD. SOLVENTS	[ ] (2) PICKLING LIQUORS	[ ] (2) ASBESTOS	[ ] (2) HOSPITAL
[ ] (3) POTW		[ ] (3) OTHER (specify):	[ ] (3) CAUSTICS	[ ] (3) MILLING/ MINE TAILINGS	[ ] (3) RADIOACTIVE
[ ] (4) ALUMINUM SLUDGE			[ ] (4) PESTICIDES	[ ] (4) FERROUS SMLTG. WASTES	[ ] (4) MUNICIPAL
[X] (5) OTHER (specify): Oily sludge from pipeline cleaning operations.			[ ] (5) DYES/INKS	[ ] (5) NON-FERROUS SMLTG. WASTES	[ ] (5) OTHER (specify):
			[ ] (6) CYANIDE	[ ] (6) OTHER (specify):	
			[ ] (7) PHENOLS		
			[ ] (8) HALOGENS		
			[X] (9) PCB		
			[ ] (10) METALS		
			[ ] (11) OTHER (specify)		

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V. WASTE RELATED INFORMATION (co 1)

3. LIST SUBSTANCES OF GREATE ONCERN WHICH MAY BE ON THE SITE (place in ending order of hazard).

PCB's
Organic solvents

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

See Attached Sheet

VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo.,day,yr.)	E. REMARKS
1. NO HAZARD				
2. HUMAN HEALTH	X			Workers and families are exposed to PCB contaminated soils.
3. NON-WORKER INJURY/EXPOSURE	X			Families of workers live on site.
4. WORKER INJURY	----			
5. CONTAMINATION OF WATER SUPPLY	----			
6. CONTAMINATION OF FOOD CHAIN	----			
7. CONTAMINATION OF GROUND WATER	----			
8. CONTAMINATION OF SURFACE WATER	X			Run-off from contaminated areas may leave site.
9. DAMAGE TO FLORA/FAUNA	----			
10. FISH KILL	----			
11. CONTAMINATION OF AIR	X			Wind blown dust from PCB contaminated soils.
12. NOTICEABLE ODORS	----			
13. CONTAMINATION OF SOIL	X			Samples analyzed by Transwestern contained 0.49 to 100 ppm PCB.
14. PROPERTY DAMAGE	----			
15. FIRE OR EXPLOSION	----			
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS	X			Run-off from contaminated area may exit site.
17. SEWER, STORM DRAIN PROBLEMS	----			
18. EROSION PROBLEMS	X			Contaminated area is disturbed and has a relatively high gradient.
19. INADEQUATE SECURITY	X			Site is fenced but contaminated area is accessible to workers and families.
20. INCOMPATIBLE WASTES	----			
21. MIDNIGHT DUMPING	----			
22. OTHER (specify):	----			

Continued From Front

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☐ 3. STATE PERMIT (specify): None

☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER

☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER

☐ 10. OTHER (specify): _____

B. IN COMPLIANCE?

☐ 1. YES ☐ 2. NO ☐ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

☒ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

☐ A. NONE ☒ B. YES (complete items 1,2,3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
Initial Inspection/Eval.	4/85	Operator	Evaluated general site conditions and potential PCB contamination at site.
Soil Sampling Program	10/85	Operator	Sampled soil in and around areas of suspected PCB contamination

X. REMEDIAL ACTIVITY (past or on-going)

☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
See Attached Sheet.			

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

Transwestern - Mountainair Compresser Station

V. Waste Related Information
C. Waste Catagories
4. Additional Comments and Narrative Description.

Results of a PCB Assessment conducted by the site operator's consultant (Woodward-Clyde Consultants, 1987) demonstrate some soil contamination by PCBs onsite. Two areas were affected; A 120ft x 120ft area around an old waste oil impoundment and a 80 x 80ft area adjacent to a pipeline fluid receiver. Maximum concentration of PCBs in any surface soil sample was 100 parts per million (ppm). Soil samples from borings in the area of the impoundment indicated PCB concentrations of 50-130 ppm at a depth of 15 to 18 feet. The operator's consultant has estimated a volume of 2,100 cubic yards of soil with PCBs above 25 ppm.

Neither of the two affected areas were fenced and exposure to families living on-site remains a concern.

X. Remedial Activity

In 1986 the area adjacent to the pipeline fluid receiver was covered with clean soil and the waste oil impoundment was pumped dry, backfilled and a synthetic cover installed.

REFERENCE

Woodward-Clyde Consultants, 1987, Polychlorinated Biphenyl Assessment, Transwestern Pipeline Company Facilities in U.S. Environmental Protection Agency New Mexico Region 6; Walnut Creek, California.